HTE# 560 1802-6007R

Harnett County Department of Public Health

25423

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PERMIT #	Operation Permit
	New Installation Septic Tank Nitrification Line Repair Expansion
Name: (owner) True Hones uc	PROPERTY LOCATION: 30 1441 Chalphoats Spring 120 LOT # 60
System Installer: DANTS Browtles	Registration #
Basement with plumbing: Garage Wimber of Bedrooms Type of Water Supply: Community Public Well	
System Type: 25% Reduction System Type: 25% Reduction System Type:	Distance from well feet TRES POUR Types V and VI Systems expire in 5 years.
(In accordance with Table V a)	Owner must confact Health Department 6 months prior to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General St	catutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	Red Live /
	18 mg frig fully
	1 P 21
	435
	231 - 32'+
	39 W 1
DEBMIT CONDITIONS	Cronlink Pr
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule	.1961.
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes	No 🗆
If yes, see attached sheet for additional opera IV. Operation:	
IV. Operation:	
V. Other:	
	□Alarm □PWR Lin
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other	
Subsurface No. of exact leng	gth width of depth of
Drainage Field ditches of each di French Drain Required: Linear feet	itch 160 feet ditches 3 feet ditches 24 inches
	1 a) agats
Authorized State Agent	Date 4-26-19